

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101588,963

FILING DATE

8-10-06

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51						
2			1	-			52						
3			1	-			53						
4			1	-			54						
5			1	-			55						
6			1	-			56						
7			1	-			57						
8			2	v			58						
9			2	v			59						
10			2	v			60						
11			2	v			61						
12			2	v			62						
13			1	-			63						
14			1	-			64						
15			1	-			65						
16			1	-			66						
17			1	-			67						
18			1	-			68						
19			1	-			69						
20			1	-			70						
21			1	-			71						
22			1	-			72						
23			1	-			73						
24			1	-			74						
25			1	-			75						
26			1	-			76						
27			1	-			77						
28			1	-			78						
29			1	-			79						
30			1	-			80						
31			1	-			81						
32			1	-			82						
33			1	-			83						
34			1	-			84						
35			1	-			85						
36			1	-			86						
37			1	-			87						
38			1	-			88						
39			1	-			89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			1		1								
TOTAL DEP.			43		43								
TOTAL CLAIMS			244										